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October 9, 2002
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Publication 1346 - Record Layout Changes #3

Record Layouts dated 10/07/02

Changes are identified by two vertical bars in the right margin $(|\cdot|)$. Deletions are identified by a hyphen followed by two vertical bars $(-|\cdot|)$.

- No changes: Forms:
 - W-2G
 - 1116
 - 2210F
 - 2439
 - 8820
 - 8379
 - 8853
- Schedule D Page 2:
 - Seq 2028: In the Identification, changed line 7 to line 8
- Form 2120:
 - Seq *+0060: Added "*" to seq number and ' or "STMbnn" ' to the Field Description
 - Seq 0130: Corrected typo in the Identification (changed "Prson" to "Person")
- Form 4255:
 - Seq 0495: Changed Identification to "Statement Reference BMF Use Only", deleted "@" from in front of the Field No., and changed Field Description to "Blank".
- Form 5329 Page 2:
 - Seqs 0450 and 0540: In the Identification, deleted the word "Withdrawn"
- Form 5884:
 - Seq 0080: Changed Identification to "Total Wages Worked 120-400 Hrs and More 400 Hrs"
 - Seq 0110: Removed "Total" from the Identification.

• Form 6251 Page 1:

- New Byte Count: 0464
- Seq 0035: Changed Identification to "AGI or AGI Less Deductions"
- New Seqs: 0089, 0092, 0094, 0096, 0098, 0100, 0102, 0104, 0106, 0110, 0114, 0118, 0122, 0126, 0130, 0134, 0138, 0142, 0146, 0150, and 0154
- Deleted Seqs: 0088, 0090, 0095, 0147, 0149, 0163, 0165, 0175, 0178, 0180, 0184, 0186, 0188, 0190, 0192, 0194, 0196, 0197, 0198, 0200, 0201, 0202, 0204, 0206, 0220, 0221, 0222, 0223, and 0225
- Seq 0267: Changed Form Ref. to "27"
- Seq 0283: Changed Form Ref. to "28"
- Seq 0287: Changed Form Ref. to "29"
- Seq 0306: Changed Form Ref. to "29"
- Seq 0315: Changed Form Ref. to "30"
- Seq 0325: Changed Form Ref. to "31"
- Seq 0330: Changed Form Ref. to "32"
- Seq 0333: Changed Form Ref. to "33"
- Seq 0337: Changed Form Ref. to "34"
- Seq 0340: Changed Form Ref. to "35"

• Form 6251 Page 2:

- New Byte Count: 0307
- New Seq: 0500
- Deleted Seqs: 0400, 0533, 0534, 0545, and 0550
- Seq 0360: Changed Form Ref. to "36"
- Seq 0370: Changed Form Ref. to "37"
- Seg 0380: Changed Form Ref. to "38"
- Seq 0390: Changed Identification to "Smaller of Lines 37 & 38 Total/Line 4 of Sch D WS" and Form Ref. to "39"
- Seq 0410: Changed Identification to "Smaller of Lines 36 or 39" and Form Ref. to "40"
- Seq 0420: Changed Identification to "Subtract Line 40 from 36" and Form Ref. to "41"
- Seq 0430: Changed line "35" to "41" in the Identification and Form Ref. from "36" to "42"
- Seq 0480: Changed Form Ref. to "43"
- Seq 0490: Changed Identification to "Smaller of Lines 36 or 37" and Form Ref. to "44"
- Seq 0505: Changed Form Ref. to "46"
- Seq 0510: Changed Identification to "Smaller of Lines 45 or 46" and Form Ref. to "47"
- Seq 0515: Changed line "40" to "47" in the Identification and Form Ref. to "48"
- Seq 0530: Changed Identification to "Subtract Line 47 from 45" and Form Ref. to "49"
- Seq 0532: Changed line "42" to "49" in the Identification and Form Ref. to "50"
- Seq 0538: Changed Form Ref. to "51"
- Seq 0540: Changed line "46" to "51" in the Identification and Form Ref. to "52"
- Seq 0553: Changed Form Ref. to "53"
- Seq 0555: Changed Form Ref. to "54"
- Seq 0557: Changed Identification to "Add Lines 42, 48, 50, 52, and 54" and Form Ref. to "55"
- \cdot Seq 0560: Changed line "29" to "36" in the Identification and Form Ref. to "56"
- Seq 0570: Changed Identification to "Smaller of Lines 55 or 56" and Form Ref. to "57"

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Form 6478:
  - Seq 0210: Changed the Identification to "Subtract Line 8 from Line 3"
  - Seg 0230: Removed "Total" from the Identification
• Form 6781:
  - Seq 0230: Changed the Identification to "Combine Lines 5 & 6"
 Form 8689:
  - Seq 0430: In the Identification, changed lines to 28 and 32
 Form 8801 Page 2:
  - Seg 0330: Changed Identification to "Smaller of Lines 28 & 29 Total/Line 4 of
     Sch D WS"
  - Seg 0510: In the Identification, added "by 26% (.26) or"
 Form 8820:
  - Seq 0050: Removed "Total" from the Identification
 Form 8826:
  - Seq 0050: Changed Identification to "Multiply Line 5 by 50%"
  - Seg 0070: Removed "Total" from the Identification
 Form 8830:
  - Seq 0030: Changed the Identification to "Qualified enhanced oil recovery costs
  X 15%"
  - Seq 0050: Removed "Total" from the Identification
 Form 8834:
  - New byte count: 0544
  - Deleted Seqs: 0055, 0105, and 0155
  - Seg 0170: Changed the Identification to "Add columns (a) through (c) on line 7"
  - Seq 0190: Changed the Identification to "Add lines 8 and 9"
 Form 8835:
  - Seq 0180: Changed the Identification to "Subtract line 11 from line 7"
  - Seq 0200: Removed "Total" from the Identification
 Form 8844:
  - Seq 0030: Changed the Identification to "Add lines 1a and 1b"
  - Seq 0050: Changed the Identification to "Add lines 2 and 3"
  - Seq 0120: Changed the Identification to "Current year credit"
 Form 8845:
  - Seq 0050: Changed the Identification to "Multiply line 3 by 20%"
  - Seq 0070: Changed the Identification to "Current year credit"
 Form 8846:
  - Seq 0060: Changed the Identification to "Multiply line 3 by 7.65%"
  - Seq 0080: Removed "Total" from the Identification
 Form 8847:
  - Seq 0030: Changed the Identification to "Multiply line 1 by 5%(.05)"
  - Seq 0050: Removed "Total" from the Identification
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Form 8861:
 - Seq 0060: Changed the Identification to "Add lines 1a and 1b"
 - Seg 0080: Removed "Total" from the Identification
Form 8862 Page 1:
   Seq 0010: Changed "2001" to "2002" in Field Description
   Seq 0080 re-sequenced to 0123: Changed Form Ref. to "6a"
   Seq 0090 re-sequenced to 0127: Changed Form Ref. to "6a"
   Seq 0100 re-sequenced to 0133: Changed "5" to "6" in Form Ref.
   Seq 0105 re-sequenced to 0137: Changed "5" to "6" in Form Ref.
   Seq 0106 re-sequenced to 0141: Changed "5" to "6" in Form Ref.
   Seq 0107 re-sequenced to 0144: Changed "5" to "6" in Form Ref.
   Seq 0108 re-sequenced to 0145: Changed "5" to "6" in Form Ref.
   Seq 0109 re-sequenced to 0147: Changed "5" to "6" in Form Ref.
   Seq 0110 re-sequenced to 0149: Changed "5" to "6" in Form Ref.
   Seq 0113 re-sequenced to 0152: Changed "5" to "6" in Form Ref.
   Seq 0116 re-sequenced to 0154: Changed "5" to "6" in Form Ref.
   Seq 0120 re-sequenced to 0075: Changed Form Ref. to "5a"
   Seq 0130 re-sequenced to 0085: Changed Form Ref. to "5a"
   Seq 0140 re-sequenced to 0095: Changed Form Ref. to "5b"
   Seq 0143 re-sequenced to 0102: Changed Form Ref. to "5b"
   Seq 0148 re-sequenced to 0118: Changed Form Ref. to "5c"
   Seq 0150 re-sequenced to 0155
   Seq 0170 re-sequenced to 0225: Changed Form Ref. to "6a"
   Seq 0180 re-sequenced to 0235: Changed Form Ref. to "6a"
   Seq 0190 re-sequenced to 0246: Changed "5" to "6" in Form Ref.
   Seq 0195 re-sequenced to 0250: Changed "5" to "6" in Form Ref.
   Seq 0196 re-sequenced to 0255: Changed "5" to "6" in Form Ref.
   Seq 0197 re-sequenced to 0260: Changed "5" to "6" in Form Ref.
   Seq 0198 re-sequenced to 0265: Changed "5" to "6" in Form Ref.
   Seq 0199 re-sequenced to 0270: Changed "5" to "6" in Form Ref.
   Seq 0200 re-sequenced to 0275: Changed "5" to "6" in Form Ref.
   Seq 0203 re-sequenced to 0280: Changed "5" to "6" in Form Ref.
   Seq 0206 re-sequenced to 0285: Changed "5" to "6" in Form Ref.
   Seq 0210 re-sequenced to 0165: Changed Form Ref. to "5a"
   Seq 0220 re-sequenced to 0175: Changed Form Ref. to "5a"
   Seq 0230 re-sequenced to 0185: Changed Form Ref. to "5b"
   Seq 0233 re-sequenced to 0194: Changed Form Ref. to "5b"
   Seq 0236 re-sequenced to 0205: Changed Form Ref. to "5c"
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Seq 0238 re-sequenced to 0215: Changed Form Ref. to "5c"

Form 8862 Page 2: - New Byte Count: 0453 New Seqs: 0510, 0520, 0540, 0545, 0800, 0810, 0890, and 0900 Deleted Seqs: 0290, 0300, 0310, 0315, 0316, 0317, 0318, 0319, 0320, 0323, 0326, 0330, 0340, 0350, 0360, 0370, 0380, 0382, 0384, 0388, 0410, 0420, 0550, 0560, 0570, 0575, 0576, 0577, 0578, 0579, 0580, 0583, 0586, 0590, 0600, 0610, 0620, 0630, 0640, 0642, 0644, 0648, 0670, and 0680 Seq 0240 re-sequenced to 0331 Seq 0241 re-sequenced to 0332 Seq 0242 re-sequenced to 0333 Seq 0243 re-sequenced to 0334 Seq 0244 re-sequenced to 0335 Seq 0245 re-sequenced to 0336 Seq 0386 re-sequenced to 0525: Changed Form Ref. to "8b" Seq 0390 re-sequenced to 0530: Changed Form Ref. to "8c" Seq 0400 re-sequenced to 0535: Changed Form Ref. to "8c" Seq 0430: Deleted "And A student" from Identification and changed "8" to "7" in the Form Ref. Seq 0440: Deleted "And A student" from Identification and changed "8" to "7" in the Form Ref. Seq 0450: Changed "8" to "7" in the Form Ref. Seq 0460: Changed "8" to "7" in the Form Ref. Seq 0470: Changed "8" to "7" in the Form Ref. Seq 0473: Changed "8" to "7" in the Form Ref. Seq 0476: Changed "8" to "7" in the Form Ref. Seg 0480: Changed "8" to "7" in the Form Ref. Seq 0490: Changed "8" to "7" in the Form Ref. Seq 0500: Changed "8" to "7" in the Form Ref. Seq 0646 re-sequenced to 0860: Changed Form Ref. to "8b"

- Seq 0650 re-sequenced to 0870: Changed Form Ref. to "8c"
- Seq 0660 re-sequenced to 0880: Changed Form Ref. to "8c"
- Seq 0690: Deleted "And A Student" from Identification and changed "8" to "7" in the Form Ref.
- Seq 0700: Deleted "And A Student" from Identification and changed "8" to "7" in the Form Ref.
- Seq 0710: Changed "8" to "7" in the Form Ref.
- Seq 0720: Changed "8" to "7" in the Form Ref.
- Seq 0730: Changed "8" to "7" in the Form Ref.
- Seq 0733: Changed "8" to "7" in the Form Ref.
- Seq 0736: Changed "8" to "7" in the Form Ref.
- Seq 0740: Changed "8" to "7" in the Form Ref.
- Seg 0750: Changed "8" to "7" in the Form Ref.
- Seq 0760: Changed "8" to "7" in the Form Ref.

Form 8863:

Seq 0490: Changed "\$50,000" to "\$51,000" and "\$100,000" to "\$102,000" in the Identification

- Schedule K-1 Page 2 (Form 8865):
 - Seq 0930: Deleted "*" from the seq number
- Schedule P (Form 8865):
 - Seqs 0235, 0575, and 0675: Deleted "+" from the seq numbers
- Form 8880:
 - New Byte Count: 0277
 - Seq 0150: Increased Length to "6"
 - Seq 0200: Changed the Identification to "Credit for Qualified Retirement Savings"

FORM 2120	Multiple	Support	Declaration

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0493" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"2120bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001 - 0000004
0010	Calendar Year		4	ҮҮҮҮ
0020	Person Supported First Name		10	AN (First Name)
0030	Person Supported Last Name		15	AN (Last Name)
*0040	Eligible Person First Name 1		10	AN (First Name) or "STMbnn"
+0045	Eligible Person Last Name 1		15	AN
+0050	Eligible Person SSN 1		9	N
*+0060	Eligible Person Street Address 1		35	AN, Allowable special characters are space, slash, hyphen, literal "NONE" or "STMbnn"
+0070	Eligible Person City 1		22	A, Allowable special character is space
+0080	Eligible Person State Abbreviation 1		2	A (Standard Postal State Abbreviation)

Multiple Support Declaration

Field No.	Identification	Form Ref.	Length	Field Description
+0090	Eligible Person Zip Code 1		12	N (left-justified)
0100	Eligible Person First Name 2		10	AN OR blank
0105	Eligible Person Last Name 2		15	AN or blank
0110	Eligible Person SSN 2		9	N or blank
0120	Eligible Person Street Address 2		35	AN, Allowable special characters are space, slash, hyphen, literal "NONE" or blank
0130	Eligible Person City 2		22	A, Allowable special character is space, or blank
0140	Eligible Person State Abbreviation 2		2	A, (Standard Postal State Abbreviation) or blank
0150	Eligible Person Zip Code 2		12	N (left-justified) or blank
0160	Eligible Person First Name 3		10	'See 2nd Occ.'
0165	Eligible Person Last Name 3		15	'See 2nd Occ.'
0170	Eligible Person SSN 3		9	'See 2nd Occ.'
0180	Eligible Person Street Address 3		35	'See 2nd Occ.'
0190	Eligible Person City 3		22	'See 2nd Occ.'
0200	Eligible Person State Abbreviation 3		2	'See 2nd Occ.'
0210	Eligible Person Zip Code 3		12	'See 2nd Occ.'

FORM 2120

Multiple Support Declaration

Field No.	Identification	Form Ref.	Length	Field Description
0220	Eligible Person First Name 4		10	'See 2nd Occ.'
0225	Eligible Person Last Name 4		15	'See 2nd Occ.'
0230	Eligible Person SSN 4		9	'See 2nd Occ.'
0240	Eligible Person Street Address 4		35	'See 2nd Occ.'
0250	Eligible Person City 4		22	'See 2nd Occ.'
0260	Eligible Person State Abbreviation 4		2	'See 2nd Occ.'
0270	Eligible Person Zip Code 4		12	'See 2nd Occ.'
0280	Signed Statements in T/P Possession Indicator		1	"X"
	Record Terminus Charac	ter	1	Value "#"

FORM 4255		Recaptu	re of Inves	tment Credit
Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0635" for Fixed; "nnnn" for variable format
	Start of Record Senti	nel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"4255bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0009	Identifying Number		9	NO ENTRY
0010	Property Desc. (1)	А	56	AN or "STMbnn"
-0020	Original Rate (1)	1A	6	R
-0023	Cost or Other Basis (1)	2A	12	N or "STMbnn"
-0080	Original Credit (1)	3A	12	N
-0084	Date Property Placed in Serv. (1)	4A	8	YYYYMMDD
-0090	Date Property Qualification (1)	5A	8	YYYYMMDD
-0100	Number of Full yrs between dates (1)	6A	2	N, "00", or blank
-0110	Recapture Percentage (1)	7A	6	R
-0120	Tentative Recap. Tax (1)	8A	12	N
0130	Property Desc. (2)	В	56	AN
0140	Original Rate (2)	1B	6	R

FORM 4255		Recapture	of Inves	tment Credit	
Field No.	Identification	Form Ref.	Length	Field Description	
0143	Cost or Other Basis (2)	2В	12	N	
0200	Original Credit (2)	3B	12	N	
0204	Date Property Placed in Serv. (2)	4B	8	YYYYMMDD	I
0210	Date Property Qualification (2)	5B	8	YYYYMMDD	I
0220	Number of Full yrs between dates (2)	6B	2	'See 1st Occ.'	
0230	Recapture Percentage (2)	7в	6	R	
0240	Tentative Recap. Tax (2)	8B	12	N	
0250	Property Desc. (3)	С	56	AN	
0260	Original Rate (3)	1C	6	R	
0263	Cost or Other Basis (3)	2C	12	N	
0320	Original Credit (3)	3C	12	N	
0324	Date Property Placed in Serv. (3)	4C	8	YYYYMMDD	I
0330	Date Property Qualification (3)	5C	8	YYYYMMDD	I
0340	Number of Full yrs between dates (3)	6C	2	'See 1st Occ.'	
0350	Recapture Percentage (3)	7C	6	R	
0360	Tentative Recap. Tax (3)	8C	12	N	
0370	Property Desc. (4)	D	56	AN	
0380	Original Rate (4)	1D	6	R	
0383	Cost or Other Basis (4)	2D	12	N	

FORM 4	255	Recapture	of Inves	tment Credit
Field No.	Identification	Form Ref.	Length	Field Description
0440	Original Credit (4)	3D	12	N
0440	Original Credit (4)	טט	12	IV
0444	Date Property Placed in Serv. (4)	4D	8	YYYYMMDD
0450	Date Property Qualification (4)	5D	8	YYYYMMDD
0460	Number of Full yrs between dates (4)	6D	2	'See 1st Occ.'
0470	Recapture Percentage (4)	7D	6	R
0480	Tentative Recap. Tax (4)	8D	12	N
0483	"Tax From Attached" Literal	9	17	"TAX FROM ATTACHED" or Blank
0486	Tax Amount	9	12	N
0490	Line 8 col A-D	9	12	N
0495	Statement Reference - BMF Use Only	10	6	Blank
0500	Tax from Property Ceasing to be At Risk	10	12	NO ENTRY
0510	Lines 9 and 10 Total	11	12	N
0520	Portion of Orig. Credit	12	12	N
0530	Total Increase Tax	13	12	N
	Record Terminus Charac	ter	1	Value "#"

FORM 5	329 PAGE 2	Additional	Taxes o	n Qualified Plans
Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0391" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0310	Record ID		6	"FRMbbb"
0311	Form Number		6	"5329bb"
0312	Page Number		5	"PG02b"
0313	Taxpayer Identification Number		9	N (Primary SSN)
0314	Filler		1	blank
0315	Form Occurrence Number		7	N 0000001 - 0000002
0400	Excess Contributions to Roth IRA for Current TY	18	12	N
0410	Roth IRA Contribution Credit	19	12	N
0420	Includible Current Tax Year Roth IRA Distributions	20	12	N
0430	Total of Lines 19 and 20	21	12	N
0440	Prev Yr Roth IRA Excess Contributions Withdrawn	22	12	N
0450	Roth IRA Current TY Excess Contributions	23	12	N
0460	Total Roth IRA Excess Contributions	24	12	N
0480	Excess Contributions Tax on Roth IRA	25	12	N

FORM 5	329 PAGE 2	Additional	Taxes c	on Qualified Plans
Field No.	Identification	Form Ref.	Length	Field Description
0490	Excess Contributions to Ed IRA for Current TY	26	12	N
0500	Ed IRA Contribution Credit	27	12	N
0510	Includible Current Tax Year Ed IRA Distributions	28	12	N
0520	Total of Lines 27 and 28	29	12	N
0530	Previous Yr Ed IRA Excess Contributions Withdrawn	30	12	N
0540	Ed IRA Current TY Excess Contributions	31	12	N
0550	Total Ed IRA Excess Contributions	32	12	N
0570	Excess Contributions Tax on Ed IRA	33	12	N
0580	Previous Year Excess Contributions Not Eliminated	34	12	N
0590	MSA Contributions Credit	35	12	N
0600	Includible MSA Distributions for Current Tax Year	36	12	N
0610	Total of Lines 35 and 36	37	12	N
0620	Previous Year MSA Excess Contributions Withdrawn	38	12	N

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FORM 5	329 PAGE 2	Additional	Taxes o	n Qualified Plans
No.	Identification	Form Ref.	Length	Field Description
0630	MSA Excess Contributions for Current TY	39	12	N
0640	Total MSA Excess Contributions	40	12	N
0660	Excess Contributions Tax on MSA	41	12	N
0670	Minimum Required Distribution	42	12	N
0680	Amount Actually Distributed	43	12	N
0690	Excess Accumulation	44	12	N
0700	Waiver	45	6	"WAIVER" or blank
@0710	Waiver Explanation	45	6	"STMbnn" or blank
0720	Tax on Excess Accumulations	45	12	N
	Record Terminus Charac	eter	1	Value "#"

WORK OPPORTUNITY CREDIT

Field No.	Identification	Form Ref.		Field Description
	Byte Count		4	"0430" for Fixed; "nnnn" for variable format
	Start of Record Ser	ntinel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"5884bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0040	Wages Paid Worked At Least 120 But < 400 Hours	1a	12	N
0050	Total Wages Worked 120-400 Hours	1a	12	N
0060	Wages Paid Worked At Least 400 Hours	1b	12	N
0070	Total Wages Worked 400 Hours or More	1b	12	N
0080	Total Wages Worked 120-400 Hrs and More 400 Hrs	2	12	N II
90085	Attach Exception Statement	2	6	"STMbnn" or blank
0090	Work Oppt. Credits From Flow-Through Entities	3	12	N
0100	1041 Portion	4	12	NO ENTRY
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FORM	5884	WORK	OPPORTUNITY	CREDIT

Field No.	Identification	Form Ref.	Length	Field Description
0110	Current Year Work Opportunity Credit	4	12	N
0120	Regular Tax Before Credits	5	12	N
0130	Alternative Minimum Tax	6	12	N
0140	Regular Tax Plus Alternative Minimum Tax	7	12	N
0150	Foreign Tax Credit	8a	12	N
0160	Credit for Child & Dependent Care Expenses (F2441)	8b	12	N
0170	Credit for Elderly or Disabled (Sch R)	8c	12	N
0180	Education Credits (Form 8863)	8d	12	N
0185	Credit for Qualified Retirement Savings	8e	12	N
0190	Child Tax Credit	8f	12	N
0200	Mortgage Interest Credit (Form 8396)	8g	12	N
0210	Adoption Credit (Form 8839)	8h	12	N
0220	DC First Time Homebuyer Credit (Form 8859)	8i	12	N
0230	Possessions Tax Credit (Form 5735)	8j	12	NO ENTRY
0240	Credit For Fuel From a Nonconventional Source	8 k	12	N

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FORM 5	884	WORK OPPORTUNITY CREDIT				
Field No.	Identification	Form Ref.	Length	Field Description		
0250	Qualified Electric Vehicle Credit	81	12	N		
0260	Add Lines 8a through 81	8m	12	N		
0270	Net Income Tax	9	12	N		
0290	Net Regular Tax	10	12	 N	 	
0300	Enter 25% of Excess	11	12	N		
0305	Tentative Minimum Tax	12	12	N	I	
0310	Greater of Line 11 or Line 12	13	12	N		
0320	Subtract Line 13 from Line 9	14	12	N		
0330	Work Opportunity Credit Allowed for	15	12	N		

Current Year

FORM 6	251 PAGE 1	Alterna	tive Minimu	m Tax - Individuals	
Field No.	Identification	Form Ref.	Length	Field Description	
	Byte Count		4	"0464" for Fixed; "nnnn" for variable format	П
	Start of Record Senti	nel	4	Value "****"	
0000	Record ID		6	"FRMbbb"	
0001	Form Number		6	"6251bb"	
0002	Page Number		5	"PG01b"	
0003	Taxpayer Identification Number		9	N (Primary SSN)	
0004	Filler		1	blank	
0005	Form Occurrence Number		7	N 0000001	
0035	AGI or AGI Less Deductions	1	12	N	
0045	Medical/Dental Expense	2	12	N	
0065	Schedule A Taxes	3	12	N	
0085	Certain Mortgage Int.	4	12	N	
0087	Miscellaneous Itemized Deductions	5	12	N	
0089	Worksheet Amount	6	12	N	
0092	Refund of Taxes	7	12	N	
0094	Investment Int. Expense	8	12	N	
0096	Depletion	9	12	 N	
0098	Net Operating Loss	10	12	И	

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FORM 6251 PAGE 1		Alternative Minimum Tax - Individuals			
Field No.	Identification	Form Ref.	Length	Field Descriptio	
0100	Tax Exempt Interest From Private Activity Bonds	11	12	N	
0102	Section 1202 Exclusion	12	12	N	
0104	Incentive Stock Options	13	12	N	
0106	Beneficiaries of Estates and Trusts	14	12	N	
0110	Large Partnerships	15	12	N	11
0114	Adjusted Gain or Loss	16	12	N	
0118	Depreciation	17	12	N	11
0122	Passive Activity Loss	18	12	N	
0126	Certain Loss Limitations	19	12	N	
0130	Circulation Expense	20	12	N	11
0134	Long-term Contracts	21	12	N	11
0138	Mining Exploration and Development Costs	22	12	N	11
0142	Research Experimental Expense	23	12	N	
0146	Certain Installment Sales	24	12	N	-11
0150	Intangible Drilling	25	12		- i i
0154	Other Adjustments	26	12	N	
				-	- - -

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Field No.	Identification	Form Ref.	Length	Field Descrip	otion
0267	Alternative Tax Net Operating Loss	27	12	N	
0283	Alternative Minimum Taxable Income	28	12	N	11
0287	Exemption Amount	29	12	N	11
0306	Child Exemption Worksheet Literal	29	1	"C" or blank	11
0315	Adjusted AMT Income	30	12	N	11
0325	Initial Minimum Tax	31	12	N	
0330	Foreign Tax Credit	32	12	N	
0333	Tentative Minimum Tax	33	12	N	11
0337	Applicable Return Tax	34	12	N	11
0340	Alternative Minimum Tax	35	12	N	11
	Record Terminus Chara	cter	1	Value "#"	

FORM 6251 PAGE 2		Alternati	als			
Field No.	Identification	Form Ref.	Length	Field Descripti		
	Byte Count		4	"0307" for Fixe "nnnn" for vari format		
	Start of Record Senting	nel	4	Value "****"		
0350	Record ID		6	"FRMbbb"		
0351	Form Number		6	"6251bb"		
0352	Page Number		5	"PG02b"		
0353	Taxpayer Identification Number		9	N (Primary SSN)		
0354	Filler		1	blank		
0355	Form Occurrence Number		7	N 0000001		
0360	Adjusted AMT Income	36	12	N	П	
0370	Amount from Sch D Line 23, or Worksheet Line 9	37	12	N	11	
0380	Unrecaptured Section 1250 Gain	38	12	N	П	
0390	Smaller of Lines 37 & 38 Total/Line 4 of Sch D WS	39	12	N	H	
0410	Smaller of Lines 36 or 39	40	12	N		
0420	Subtract Line 40 from 36	41	12	N	П	
0430	Multiply Line 41 by .26 or.28 and Subtract \$3,500	42	12	N	H	
0480	Amount from Sch D Line 28, or Worksheet Line 16	43	12	N	11	

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FORM 6251 PAGE 2		Alternative Minimum Tax - Individuals			
Field No.	Identification	Form Ref.	Length	Field	Description
0490	Smaller of Lines 36 or 37	44	12	N	11
0500	Enter Smaller of Line 43 or Line 44	45	12	N	11
0505	Qualified 5-Year Gain From Schedule D	46	12	N	11
0510	Smaller of Lines 45 or 46	47	12	N	11
0515	Multiply Line 47 by .08	48	12	N	11
0530	Subtract Line 47 from 45	49	12	N	11
0532	Multiply Line 49 by .10	50	12	N	11
					!!
0538	Subtract Line 45 from 44	51	12	N	
0540	Multiply Line 51 by .20	52	12	N	П
0553	Net Adjusted AMT Income	53	12	N	
0555	Net Adjusted AMT Income Multiply by .25	54	12	N	11
0557	Add Lines 42, 48, 50, 52, and 54	55	12	N	11
0560	Multiply Line 36 by .26 or .28 and Subtract \$3,500	56	12	N	11
0570	Smaller of Lines 55 or 56	57	12	N	11

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FORM 62	251 PAGE 2	Alternative Minimum Tax - Individuals			
Field No.	Identification	Form Ref.	Length	Field Description	
	Record Terminus Charac	ter	1	Value "#"	

FORM 6	478	Credit for	Alcohol	Used as Fuel
Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0622" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"6478bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0020	Qualified ethanol fuel production (gallons)	1(a)	12	N
0030	Total qualified ethanol fuel	1(c)	12	N
0040	190 proof or greater (in gallons)	2a(a)	12	N
0050	Total 190 proof or greater	2a(c)	12	N
0060	Less than 190 proof but at least 150 proof	2b(a)	12	N
0070	Total less than 190 proof but at least 150 proof	2b(c)	12	N
0800	Add lines 1, 2a and 2b	3(a)	12	N
0090	Total add lines 1, 2a, and 2b	3 (c)	12	N

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FORM 6	478	Credit for	Alcohol	Used as Fuel
Field No.	Identification	Form Ref.	Length	Field Description
	Other fuels blended with alcohol on lines 2a & 2b	4(a)	12	N
0110	Total gallons of fuel	5a(a)	12	N
0120	Total gallons containing less than 5.7%	5b(a)	12	N
0130	Subtract line 5b from line 5a	6(a)	12	N
0140	Aviation fuel for use in noncommercial aviation	7a(a)	12	N
0150	Total aviation fuel for use in noncommercial	7a(c)	12	N
0160	Gasohol containing less than 85% alcohol	7b(a)	12	N
0170	Total gasohol containing less than 85% alcohol	7b(c)	12	N
0180	Special motor fuel containing 85% or more alcohol	7c(a)	12	N
0190	Total special motor fuel containing 85% alcohol	7c(c)	12	N
0200	Add lines 7a through 7c	8	12	N
0210	Subtract Line 8 from Line 3	9	12	N
0220	Flow-through alcohol fuel credits from partnership	10	12	N

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FORM 6	478	Credit for	Alcohol	Used as Fuel
Field No.	Identification	Form Ref.	Length	Field Description
0225	1041 portion amount	11	12	NO ENTRY
0230	Current year credit for alcohol used as fuel	11	12	N
0233	1041 beneficiaries amount	11	12	NO ENTRY
0235	Attach 1041 statement	11	6	NO ENTRY
0240	Regular tax before credits	12	12	N
0250	Alternative minimum tax	13	12	N
0260	Regular Tax Plus Alternative Minimum Tax	14	12	N
0270	Foreign tax credit	15a	12	N
0280	Credit for child & dependent care expenses	15b	12	N
0290	Credit for elderly or disabled	15c	12	N
0300	Education credits	15d	12	N
0305	Credit for Qualified Retirement Savings	15e	12	N I
0310	Child tax credit	15f	12	N
0320	Mortgage interest credit	15g	12	N
0330	Adoption credit	15h	12	N
0340	District of Columbia first time homebuyer credit	15i	12	N
0350	Possessions tax credit (Form 5735)	15j	12	NO ENTRY

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FORM 6478		Credit for	Alcohol	Used as Fuel
Field No.	Identification	Form Ref.	Length	Field Description
0360	Credit for fuel from a nonconventional source	15k	12	N
0370	Qualified electric vehicle credit	151	12	N
0380	Add lines 15a through 151	15m	12	N
0390	Net income tax	16	12	N
0410	Net Regular Tax	17	12	N
0420	Enter 25% of Excess	18	12	N
0425	Tentative Minimum Tax	19	12	N I
0430	Greater of line 18 or line 19	20	12	N I
0440	Subtract line 20 from line 16	21	12	N
0450	Credit for alcohol used as fuel	22	12	N
	Record Terminus Charac	ter	1	Value "#"

Field No.	Identification	Form Ref. 	Length	Field Description
	Byte Count		4	"1163" for Fixed; "nnnn" for variable format
	Start of Record Sent	inel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"6781bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0009	Identifying Number		9	NO ENTRY
0010	Attached List of Foreign Currency Contracts		6	"STMbnn" or blank
0020	Mixed Straddle Election Box	А	1	"X" or blank
0030	Straddle by Straddle Identification Election Box	В	1	"X" or blank
0040	Mixed Straddle Account Election Box	С	1	"X" or blank
0050	Statement Required by Regulations	С	6	"STMbnn" or blank
0060	Net Section 1256 Contracts Loss Election Box	D	1	"X" or blank
0070	Identification of Account - 1	1a(1)	46	AN, "STMbnn" or blank
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FORM 6781		Gains and Losses from Section 1256, Contracts				
	Field No.	Identification	Form Ref.	Length	Field Description	n -
	+0080	Section 1256 Contracts Loss - 1	1b(1)	12	N	
	+0090	Section 1256 Contracts Gain - 1	1c(1)	12	N	
	0100	Identification of Account - 2	1a(2)	46	AN or blank	
	0110	Section 1256 Contracts Loss - 2	1b(2)	12	'See 1st Occ.'	
	0120	Section 1256 Contracts Gain - 2	1c(2)	12	'See 1st Occ.'	
	0130	Identification of Account - 3	1a(3)	46	'See 2nd Occ.'	
	0140	Section 1256 Contracts Loss - 3	1b(3)	12	'See 1st Occ.'	
	0150	Section 1256 Contracts Gain - 3	1c(3)	12	'See 1st Occ.'	
	0160	Total Section 1256 Contracts Loss	2b	12	N	
	0170	Total Section 1256 Contracts Gain	2c	12	N	
	0180	Total Section 1256 Contracts Net Gain or Loss	3c	12	N	
	@0190	Form 1099-B Adjustment Schedule	4c	6	"STMbnn" or blank	2
	0200	Form 1099-B Adjustments	4c	12	N	
	0210	Net Gain or Loss and Form 1099-B Adjustments	5c	12	N	
	0220	Net Section 1256 Contracts Loss	6c	12	N	
	0230	Combine Lines 5 & 6	7c	12	N	11

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	· · ·	Contracts		
Field No.	Identification	Form Ref.	Length	Field Description
0240	Short-Term Capital Gain or Loss	8c	12	N
0250	Long-Term Capital Gain or Loss	9c	12	N
@0260	Attached Schedule of Straddles and Components	Part II	6	"STMbnn" or blank
*0270	Description of Property (Losses) - 1	10a(1)	35	AN, "STMbnn" or blank
+0280	Delivery Date (Losses) - 1	10b(1)	8	YYYYMMDD or blank
+0290	Date Close Out or Sold (Losses) - 1	10c(1)	8	YYYYMMDD or blank
+0300	Gross Sales Price (Losses) - 1	10d(1)	12	N
+0310	Cost or Other Basis Plus Commissions (Losses) - 1	10e(1)	12	N
*+0320	Losses from Straddles - 1	10f(1)	12	N or "STMbnn"
+0330	Unrecognized Gain On Offsetting Positions - 1	10g(1)	12	N
+0340	Recognized Losses - 1	10h(1)	12	N
+0350	28% Rate Loss - 1	10i(1)	12	N

0360 Description of 10a(2) 35 AN or blank

0370 Delivery Date 10b(2) 8 'See 1st Occ.'

0380 Date Close Out or 10c(2) 8 'See 1st Occ.'

Gains and Losses from Section 1256,

(Losses) - 2

Property (Losses) - 2

Sold (Losses) - 2

FORM 6781

FORM 6	781	Gains and Losses from Section 1256, Contracts				
Field No.	Identification	Form Ref.	Length	Field Description		
0390	Gross Sales Price (Losses) - 2	10d(2)	12	'See 1st Occ.'		
0400	Cost or Other Basis Plus Commissions (Losses) - 2	10e(2)	12	'See 1st Occ.'		
0410	Losses from Straddles - 2	10f(2)	12	N		
0420	Unrecognized Gain On Offsetting Positions - 2	10g(2)	12	'See 1st Occ.'		
0430	Recognized Losses - 2	10h(2)	12	'See 1st Occ.'		
0440	28% Rate Loss - 2	10i(2)	12	'See 1st Occ.'		
@0450	Separate Schedule of Short-Term Losses	11	6	"STMbnn" or blank		
0460	Short-Term Portion of Recognized Loss	11a(h)	12	N		
0470	Long-Term Portion of Recognized Loss	11b(h)	12	N		
0480	Long-Term Portion of 28% Rate Loss	11b(i)	12	N		
*0490	Description of Property (Gains) - 1	12a(1)	35	AN, "STMbnn" or blank		
+0500	Delivery Date (Gains) - 1	12b(1)	8	YYYYMMDD or blank		
+0510	Date Close Out or Sold (Gains) - 1	12c(1)	8	YYYYMMDD or blank		
+0520	Gross Sales Price (Gains) - 1	12d(1)	12	N		
+0530	Cost or Other Basis Plus Commissions (Gains) - 1	12e(1)	12	N		
*+0540	Gains from Straddles - 1	12f(1)	12	N or "STMbnn"		

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FORM 0/01			Contracts			
Field No.	Identification	Form Ref.	Length	Field Description		
+0550	28% Rate Gain - 1	12g(1)	12	N		
0560	Description of Property (Gains) -	12a(2)	35	AN or blank		
0570	Delivery Date (Gains) - 2	12b(2)	8	'See 1st Occ.'		
0580	Date Close Out or Sold (Gains) - 2	12c(2)	8	'See 1st Occ.'		
0590	Gross Sales Price (Gains) - 2	12d(2)	12	'See 1st Occ.'		
0600	Cost or Other Basis Plus Commissions (Gains) - 2	12e(2)	12	'See 1st Occ.'		
0610	Gains from Straddles - 2	12f(2)	12	N		
0620	28% Rate Gain - 2	12g(2)	12	'See 1st Occ.'		
@0630	Separate Schedule of Short-Term Gains	13	6	"STMbnn" or blank		
0640	Short-Term Portion of Gains - 1	13a(f)	12	N		
0650	Long-Term Portion of Gains - 2	13b(f)	12	N		
0660	Long-Term Portion of 28% Rate Gain	13b(g)	12	N		
*0670	Description of Property (Unrecognized Gains) - 1	14a(1)	35	AN, "STMbnn" or blank		
+0680	Date Acquired (Unrecognized Gains) - 1	14b(1)	8	YYYYMMDD or blank		
+0690	Fair Market Value on Last Business Day of TY - 1	14c(1)	12	N		
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Gains and Losses from Section 1256,

FORM 6781

FORM 6781	Gains	and	Losses	from	Section	1256,
	Contra	acts				

Field No.	Identification	Form Ref.	Length	Field Description
+0700	Cost or Other Basis As Adjusted - 1	14d(1)	12	N
+0710	Unrecognized Gain - 1	14e(1)	12	N
0720	Description of Property (Unrecognized Gains) - 2	14a(2)	35	AN or blank
0730	Date Acquired (Unrecognized Gains) - 2	14b(2)	8	'See 1st Occ.'
0740	Fair Market Value on Last Business Day of TY - 2	14c(2)	12	'See 1st Occ.'
0750	Cost or Other Basis As Adjusted - 2	14d(2)	12	'See 1st Occ.'
0760	Unrecognized Gain - 2	14e(2)	12	'See 1st Occ.'
0770	Description of Property (Unrecognized Gains) - 3	14a(3)	35	'See 2nd Occ.'
0780	Date Acquired (Unrecognized Gains) - 3	14b(3)	8	'See 1st Occ.'
0790	Fair Market Value on Last Business Day of TY - 3	14c(3)	12	'See 1st Occ.'
0800	Cost or Other Basis As Adjusted - 3	14d(3)	12	'See 1st Occ.'
0810	Unrecognized Gain - 3	14e(3)	12	'See 1st Occ.'
	Record Terminus Charac	ter	1	Value "#"

to	the	VI
\sim	CIIC	v <u> </u>

	Identification	Form	Length	Field Description
No.		Ref.		
	Byte Count		4	"0577" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8689bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0120	Wages, Salaries, Tips	1	12	 N
0130	Taxable Interest	2	12	N
0140	Ordinary Dividends	3	12	N
0150	Taxable Refunds, Credits, or Offsets of Local Tx	4	12	N
0160	Alimony Received	5	12	N
0170	Business Income or Loss	6	12	N
0180	Capital Gain or Loss	7	12	N
D1-1-2	1246	1 07 00	0.0	D

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FORM 8689		Allocation to the VI	of Indi	vidual Income Tax	
Field No.	Identification	Form Ref.	Length	Field Description	<u>-</u>
0190	Other Gains or Losses	8	12	N	
0200	IRA Distributions (Taxable Amount)	9	12	N	
0210	Pensions And Annuities (Taxable Amount)	10	12	И	
0220	Rental Real Estate, Royalties , Partnerships, etc.	11	12	N	
0230	Farm Income or Loss	12	12	N	
0240	Unemployment Compensation	13	12	N	
0250	Social Security Benefits (Taxable Amount)	14	12	N	
*0260	Type of Other Income	15	12	AN or "STMbnn"	
+0270	Amount of Other Income	15	12	N	
0275	Total Other Income	15	12	N	
0280	Total Income	16	12	N	
0285	Educator Expenses	17	12	N	11
0290	IRA Deduction	18	12	N	11
0300	Student Loan Interest Deduction	19	12	N	
0305	Tuition and Fees Deduction	20	12	N	
0310	Medical Savings Account Deduction	21	12	N	
0320	Moving Expenses	22	12	N	11
0330	One-Half of Self- Employment Tax	23	12	N	

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		00 0110 12			
Field No.	Identification	Form Ref.	Length	Field Description	n
					-
0340	Self-Employed Health Insurance Deduction	24	12	N	
0350	Self-Employed SEP/ SIMPLE, and Qualified Plans	25	12	N	
0360	Penalty on Early Withdrawal of Savings	26	12	N	
0370	Total Other Adjustments	27	12	N	
0380	Adjusted Gross Income	28	12	N	
0390	Total Tax From Form 1040	29	12	N	
0400	Adjustment to Total Tax Amount	30	12	N	
0410	Adjusted Total Tax Amount	31	12	N	
0420	Adjusted Gross Income from Form 1040	32	12	N	
0430	Divide Line 28 by Line 32	33	6	R	
0440	Tax Allocated to The Virgin Islands	34	12	N	
0450	VI Tax Withheld	35	12	N	11
0460	ES Payments	36	12	N	П
0470	Form 4868 Amount	37	12	N	11
0480	Total Payments	38	12	N	11
0485	Smaller of Allocated Tax or Total Payments	39	12	N	

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FORM 8689	Allocation	of	Individual	Income	Tax
	to the VI				

Field No.	Identification	Form Ref.	Length	Field Description	n -
0490	Overpaid to Virgin Islands	40	12	N	11
0500	Refund	41	12	N	
0510	Applied to ES Tax	42	12	N	
0520	Amount Owed to Virgin Islands	43	12	N	

FORM 8	801 PAGE 2	Credit For	Prior Y	ear Minimum Tax
Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0307" for Fixed; "nnnn" for variable format
	Start of Record Sentir	nel	4	Value "****"
0290	Record ID		6	"FRMbbb"
0291	Form Number		6	"8801bb"
0292	Page Number		5	"PG02b"
0293	Taxpayer Identification Number		9	N (Primary SSN)
0294	Filler		1	blank
0295	Form Occurrence Number		7	N 0000001
0300	Amount from Line 10	27	12	N
0310	Amount from Prior Year Sch D, Line 23	28	12	N
0320	Amount from Prior Year Sch D, Line 19	29	12	N
0330	Smaller of Lines 28 & 29 Total/Line 4 of Sch D WS	30	12	N
0350	Smaller of Line 27 or Line 30	31	12	N
0360	Line 27 Minus Line 31	32	12	N
0370	Multiply Line 32 by 26% (.26) or by 28% (.28)	33	12	N
0380	Amount from Prior Year Sch D, Line 28	34	12	N
0390	Smaller of Line 27 or 28	35	12	N

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FORM 8	801 PAGE 2	Credit For	Prior Y	Year Minimum Tax	
Field No.	Identification	Form Ref.	Length	Field Description	
0400	Smaller of Line 34 or Line 35	36	12	N	I
0410	Amount from Prior Year Sch D, Line 29	37	12	N I	I
0420	Smaller of Line 36 or Line 37	38	12	N	
0430	Multiply Line 38 by 8% (.08)	39	12	N	I
0440	Line 36 minus Line 38	40	12	N	
0450	Multiply line 40 by 10% (.10)	41	12	N	I
0460	Line 35 Minus Line 36	42	12	N	I
0470	Multiply Line 42 by 20% (.20)	43	12	N	
0480	Line 31 Minus Line 35	44	12	N	
0490	Multiply Line 44 by 25% (.25)	45	12	N I	
0500	Add Lines 33, 39, 41, 43 and 45	46	12	N	I
0510	Multiply Line 27 by 26% (.26) or by 28% (.28)	47	12	N I	
0520	Smaller of Line 46 or Line 47	48	12	N	
			4		

FORM 8820 Orphan Drug Credit

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0388" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8820bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0020	Qualified Clinical Testing Expenses Paid	1	12	N
0030	Current Year Credit	2	12	N
0040	Flow-through Orphan Drug Credit(s)	3	12	N
0045	1041 Portion Amount	4	12	NO ENTRY
0050	Current Year Orphan Drug Credit	4	12	N
0060	Regular Tax Before Credits	5	12	N
0070	Alternative Minimum Tax	6	12	N
0800	Regular Tax Plus Alternative Minimum Tax	7	12	N
0090	Foreign Tax Credit	8a	12	N

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FORM 8	820	Orphan Dru	g Credit	
No.	Identification	Form Ref.	Length	Field Description
0100	Credit for Child & Dependent Care Expenses (F2441)	d8	12	N
0110	Credit for Elderly or Disabled (Sch R)	8c	12	N
0120	Education Credits (Form 8863)	8d	12	N
0125	Credit for Qualified Retirement Savings	8e	12	N
0130	Child Tax Credit	8f	12	N
0140	Mortgage Interest Credit (Form 8396)	8g	12	N
0150	Adoption Credit (Form 8839)	8h	12	N
0160	District of Columbia First Time HomeBuyer Credit	8i	12	N
0170	Possessions Tax Credit (Form 5735)	8j	12	NO ENTRY
0180	Credit for Fuel from a Nonventional Source	8 k	12	N
0190	Qualified Electric Vehicle Credit (Form 8834)	81	12	N
0200	Add Lines 8a through 81	8m	12	N
0210	Net Income Tax	9	12	N
0230	Net Regular Tax	10	12	N
0240	Enter 25% of Excess	11	12	N
0245	Tentative Minimum Tax	12	12	N

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FORM 8	820	Orphan Dru	g Credit		
Field No.	Identification	Form Ref.	Length	Field Description	
0250	Greater of Line 11 or Line 12	13	12	N	I
0260	Subtract Line 13 from Line 9	14	12	N	
0270	Orphan Drug Credit Allowed for Current Year	15	12	N	
	Record Terminus Charac	ter	1	Value "#"	

Disabled Access Credit

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0406" for Fixed; "nnnn" for variable format
	Start of Record Sentir	nel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8826bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	Blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0020	Total Eligible Access Expenditures	1	12	N
@0025	Controlled Group Schedule Attached	1	6	"STMbnn" or blank
0030	Subtract Line 2 from Line 1	3	12	N
0040	Smaller Amount of Line 3 or Line 4	5	12	N
0050	Multiply Line 5 by 50%	6	12	N
0060	Disabled Access Credits From Flow- Through Entities	7	12	N
0070	Current Year Disabled Access Credit	8	12	N
0080	Regular Tax Before Credits	9	12	N

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FORM	8826	Disabled	Access	Credit
	0020	21000100	110000	0 = 0 0. = 0

Field No.	Identification	Form Ref.	Length	Field Description
0090	Alternative Minimum Tax	10	12	N
0100	Regular Tax Plus Alternative Minimum Tax	11	12	N
0110	Foreign Tax Credit	12a	12	N
0120	Credit for Child and Dependent Care Expenses	12b	12	N
0130	Credit for Elderly or Disabled	12c	12	N
0140	Education Credits	12d	12	N
0145	Credit for Qualified Retirement Savings	12e	12	N
0150	Child Tax Credit	12f	12	N
0160	Mortgage Interest Credit	12g	12	N
0170	Adoption Credit	12h	12	N
0180	District of Columbia First Time Homebuyer Credit	12i	12	N
0190	Possession Tax Credit	12j	12	NO ENTRY
0200	Credit for Fuel from A Nonconventional Source	12k	12	N
0210	Qualified Electric Vehicle Credit	121	12	N
0220	Add Line 12a - Line 121	12m	12	N
0230	Net Income Tax	13	12	N

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FORM 8826

Disabled Access Credit

Field No.	Identification	Form Ref.	Length	Field Description
0250	Net Regular Tax	14	12	N
0260	Enter 25% of Excess	15	12	N
0265	Tentative Minimum Tax	16	12	N
0270	Greater of Line 15 or Line 16	17	12	N
0280	Subtract Line 17 from Line 13	18	12	N
0290	Disabled Access Credit Allowed for Current Year	19	12	N

ENHANCED OIL RECOVERY CREDIT

Field No.	Identification	Form Ref.	Length	Field Description	
	Byte Count		4	"0376" for Fixed; "nnnn" for variable format	:
	Start of Record Sentin	el	4	Value "****"	
0000	Record ID		6	"FRMbbb"	
0001	Form Number		6	"8830bb"	
0002	Page Number		5	"PG01b"	
0003	Taxpayer Identification Number		9	N (Primary SSN)	
0004	Filler		1	blank	
0005	Form Occurrence Number		7	N 0000001	
0010	Identifying Number		9	NO ENTRY	
0020	Qualified enhanced oil recovery costs	1	12	N	
0030	Qualified enhanced oil recovery costs X 15%	2	12	N	
0040	Enhanced oil recovery credits from flow-through	3	12	N	
0050	Current year credit	4	12	N	
0060	Regular tax before credits	5	12	N	
0070	Alternative minimum tax	6	12	N	
0800	Regular Tax Plus Alternative Minimum Tax	7	12	N	
0090	Foreign tax credit	8a	12	N	

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FORM 8	8830	ENHANCED O	IL RECOV	ERY CREDIT
Field No.	Identification	Form Ref.	Length	Field Description
0100	Credit for child & dependent care expenses	8b	12	N
0110	Credit for elderly or disabled	8c	12	N
0120	Education credits	8d	12	N
0125	Credit for Qualified Retirement Savings	8e	12	N
0130	Child tax credit	8f	12	N
0140	Mortgage Interest Credit	8g	12	N
0150	Adoption Credit	8h	12	N
0160	District of Columbia first time homebuyer credit	8i	12	N
0170	Possessions tax credit (Form 5735)	8j	12	NO ENTRY
0180	Credit for fuel from a nonconventional source	8k	12	N
0190	Qualified electric vehicle credit	81	12	N
0200	Add lines 8a through 81	8m	12	N
0210	Net income tax	9	12	N
0230	Net regular tax	10	12	N
0240	Enter 25% of Excess	11	12	N I
0245	Tentative minimum tax	12	12	N
0250	Greater of line 11 or line 12	13	12	N

FORM 8	830	ENHANCED (OIL RECOV	ERY CREDIT
Field No.	Identification	Form Ref.	Length	Field Description
0260	Subtract line 13 from line 9	14	12	N
0270	Enhanced oil recovery credit allowed current year	15	12	N
	Record Terminus Charac	ter	1	Value "#"

FORM 8	834	Qualified	Electric	Vehicle Credit
Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0544" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "***"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8834bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001 - 0000005
0010	Identifying Number		9	NO ENTRY
0015	Date Vehicle Place in Service 1	1(a)	8	YYYYMMDD
0020	Cost of Vehicle 1	2(a)	12	N
0030	Section 179 expense deduction - 1st vehicle	3 (a)	12	N
0040	Subtract line 3 from line 2 - 1st vehicle	4 (a)	12	N
0050	Multiply Line 4 by Appropriate Percent- 1st Vehicle	5(a)	12	N
0060	Smaller of line 5 or line 6 - 1st vehicle	7 (a)	12	
0065	Date Vehicle Placed in Service 2	1(b)	8	YYYYMMDD or Blank
0070	Cost of Vehicle 2	2 (b)	12	N

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FORM 8	834	Qualified	Electric	Vehicle Credit
Field No.	Identification	Form Ref.	Length	Field Description
0800	Section 179 expense deduction - 2nd vehicle	3 (b)	12	N
0090	Subtract line 3 from line 2 - 2nd vehicle	4 (b)	12	N
0100	Multiply line 4 by Appropriate Percent- 2nd vehicle	5 (b)	12	N
0110	Smaller of line 5 or line 6 - 2nd vehicle	7 (b)	12	n
0115	Date Vehicle Place in Service 3	1(c)	8	YYYYMMDD or Blank
0120	Cost of Vehicle 3	2(c)	12	N
0130	Section 179 expense deduction - 3rd vehicle	3 (c)	12	N
0140	Subtract line 3 from line 2 - 3rd vehicle	4 (c)	12	N
0150	Multiply line 4 by Appropriate Percent- 3rd vehicle	5 (c)	12	N
0160	Smaller of line 5 or line 6 - 3rd vehicle	7(c)	12	 N
0170	Add columns (a) through (c) on line 7	8	12	N
0175	Credit From Pass- Through Entities	9	12	N
0190	Add lines 8 and 9	10	12	N
0200	Passive activity credits	11	12	N

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FORM 8	834	Qualified 1	Electric	Vehicle Credit
No.	Identification	Form Ref.	Length	Field Description
0210	Subtract line 11 from line 10	12	12	N
0220	Passive activity credits allowed	13	12	N
0230	Tentative qualified electric vehicle credit	14	12	N
0240	Regular tax before credits	15	12	N
0250	Foreign tax credit	16a	12	N
0260	Credit for child and dependent care expenses	16b	12	N
0270	Credit for elderly or disabled	16c	12	N
0280	Education credits	16d	12	N
0285	Credit for Qualified Retirement Savings	16e	12	N
0290	Child tax credit	16f	12	N
0300	Mortgage interest credit	16g	12	N
0310	Adoption credit	16h	12	N
0320	District of Columbia first time homebuyer credit	16i	12	N
0330	Possessions tax credit (Form 5735)	16j	12	NO ENTRY
0340	Credit for fuel from a nonconventional source	16k	12	N
0350	Add line 16a - Line 16k	161	12	N

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FORM 8	834	Qualified	Electric	Vehicle Credit
Field No.	Identification	Form Ref.	Length	Field Description
0360	Net regular tax (subtract line 161 from line 15)	17	12	N
0370	Tentative minimum tax	18	12	N
0380	Excess of net tax over tentative minimum tax	19	12	N
0390	Qualified electric vehicle credit	20	12	N
	Record Terminus Charac	ter	1	Value "#"

FORM	8835	RENEWABLE	ELECTRICITY	PRODUCTION	CREDIT

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0588" for Fixed; "nnnn" for variable format
	Start of Record Senti	nel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8835bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0015	Fiscal Year Filer literal	1	2	"FY" or blank
0020	Kilowatt hours produced and sold	1	12	N
0030	Total Kilowatt hours produced and sold	1	12	N
10035	Attach fiscal year computation	1	6	"STMbnn" or blank
0040	Phaseout adjustment	2	12	N
0045	Phaseout adjustment rate	2	6	R
0050	Total phaseout adjustment	2	12	N
90055	Attach fiscal year computation	2	6	"STMbnn" or blank

FORM 8835		KENEWABI	E ELECIRIC	ITY PRODUCTION CREI	
Field No.	Identification	Form Ref.	Length	Field Description	
0060	Credit for electricity produced by closed-loop	3	12	N	
0070	Kilowatt hours produced and sold	4	12	N	
0800	Total kilowatt hours produced and sold	4	12	N	
90085	Attach fiscal year computation	4	6	"STMbnn" or blank	
0090	Phaseout adjustment	5	12	N	
0100	Phaseout adjustment rate	5	6	R	
0110	Total phaseout adjustment	5	12	N	
0115	Attach fiscal year computation	5	6	"STMbnn" or blank	
0120	Credit for electricity produced by wind facility	6	12	N	
0130	Total credit before reduction	7	12	N	
0140	Total of government grants	8	12	N	
0150	Total of additions to the capital account	9	12	N	
0160	Divide line 8 by line 9	10	6	N	
0170	Multiply line 7 by line 10	11	12	N	
0180	Subtract line 11 from line 7	12	12	N	

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FORM 8	835	RENEWABLE	ELECTRIC	ITY PRODUCTION CREDIT
Field No.	Identification	Form Ref.	Length	Field Description
0190	Credit(s) from flow- through entities	13	12	И
0195	Form 1041 portion amount	14	12	NO ENTRY
0200	Current year credit	14	12	N
0210	Regular tax before credits	15	12	N
0220	Alternative minimum tax	16	12	N
0230	Regular Tax Plus Alternative Minimum Tax	17	12	N
0240	Foreign tax credit	18a	12	N
0250	Credit for child care and dependent care expenses	18b	12	N
0260	Credit for elderly or disabled	18c	12	N
0270	Education credits	18d	12	N
0275	Credit for Qualified Retirement Savings	18e	12	N
0280	Child tax credit	18f	12	N
0290	Mortgage interest credit	18g	12	N
0300	Adoption credit	18h	12	N
0310	District of Columbia first time homebuyer credit	18i	12	N
0320	Possessions tax credit (Form 5735)	18j	12	NO ENTRY

FORM 8835		RENEWABLE ELECTRICITY PRODUCTION CREDIT		
Field No.	Identification	Form Ref.	Length	Field Description
0330	Credit for fuel from a nonconventional source	18k	12	N
0340	Qualified electric vehicle credit	181	12	N
0350	Add line 18a - Line 181	18m	12	N
0360	Net income tax	19	12	N
0380	Net Regular Tax	20	12	 N
0390	Enter 25% of Excess	21	12	N
0395	Tentative Minimum Tax	22	12	N
0400	Greater of line 21 or line 22	23	12	N
0410	Subtract line 23 from line 19	24	12	N
0420	Renewable electricity credit allowed	25	12	N

EMPOWERMENT ZONE AND RENEWAL COMMUNITY

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0532" for Fixed; "nnnn" for variable format
	Start of Record Senting	nel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8844bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0015	Qualified Empowerment Zone Wages	1a	12	N
0020	Total Qualified Empowerment Zone Wages	1a	12	N
0025	Qualified Renewal Community Wages	1b	12	N
0027	Total Qualified Renewal Community Wages	1b	12	N
0030	Add lines la and lb	2	12	N
0040	Credits from flow- through entities	3	12	N
0050	Add lines 2 and 3	4	12	N
0060	Credit from passive activities	5	12	N

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FORM 8844	EMPOWERMENT	ZONE	AND	RENEWAL	COMMUNITY

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Field No.	Identification	Form Ref.	Length	Field Description
0070	Subtract line 5 from line 4	6	12	N
0080	Passive activity credit allowed	7	12	N
0090	Carryforward of credit	8	12	N
0100	Carryback of credit	9	12	NO ENTRY
0110	1041 portion amount	10	12	NO ENTRY
0120	Current year credit	10	12	N
0130	Regular tax before credits	11	12	N
0140	Alternative minimum tax	12	12	N
0150	Regular Tax Plus Alternative Minimum Tax	13	12	N
0160	Foreign tax credit	14a	12	N
0170	Credit for child & dependent care expenses	14b	12	N
0180	Credit for elderly or disabled	14c	12	N
0190	Education credits	14d	12	N
0195	Credit for Qualified Retirement Savings	14e	12	N
0200	Child tax credit	14f	12	N
0210	Mortgage interest credit	14g	12	N
0220	Adoption credit	14h	12	N

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Field No.	Identification	Form Ref.	Length	Field Description
0230	District of Columbia first time homebuyer credit	14i	12	N
0240	Possessions tax credit (Form 5735)	14j	12	NO ENTRY
0250	Credit for fuel from a nonconventional source	14k	12	N
0260	Qualified electric vehicle credit	141	12	N
0270	Add lines 14a through 141	14m	12	N
0280	Net income tax	15	12	N
0310	Net Regular Tax	16	12	N
0315	Tentative Minimum Tax	17	12	N
0320	Enter 25% of Excess	18	12	N
0325	Multiply line 16 by 75%	19	12	N
0330	Greater of line 18 or line 19	20	12	N
0340	Subtract line 20 from line 15	21	12	N
0350	General business credit	22	12	N
0360	Subtract line 22 from line 21	23	12	N
0370	Credit allowed for current year	24	12	N

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FORM 8844	EMPOWERMEN	IT ZONE AND RENEWAL COMMUNITY
Field Identification No.	Form Ref.	Length Field Description

FORM 8845

INDIAN EMPLOYMENT CREDIT

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0412" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8845bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0020	Total of qualified wages	1	12	N
0030	Calendar year 1993 qualified wages	2	12	N
0040	<pre>Incremental increase (subtract line 2 from line 1)</pre>	3	12	N
0050	Multiply line 3 by 20%	4	12	N
0060	Indian employment credits from flow-through	5	12	N
0065	Form 1041 portion amount	6	12	NO ENTRY
0070	Current year credit	6	12	N
0800	Regular tax before credits	7	12	N
0090	Alternative minimum tax	8	12	N

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FORM 8	845	INDIAN E	MPLOYMENT	CREDIT
Field No.	Identification	Form Ref.	Length	Field Description
0100	Regular Tax Plus Alternative Minimum Tax	9	12	N
0110	Foreign tax credit	10a	12	N
0120	Credit for child & dependent care expenses	10b	12	N
0130	Credit for elderly or disabled	10c	12	N
0140	Education credits	10d	12	N
0145	Credit for Qualified Retirement Savings	10e	12	N
0150	Child tax credit	10f	12	N
0160	Mortgage interest credit	10g	12	N
0170	Adoption credit	10h	12	N
0180	District of Columbia first time homebuyer credit	10i	12	N
0190	Possessions tax credit (Form 5735)	10ј	12	NO ENTRY
0200	Credit for fuel from a nonconventional source	10k	12	N
0210	Qualified electric vehicle credit	101	12	N
0220	Add lines 10a through 101	10m	12	N
0230	Net income tax	11	12	N

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0250 Net Regular Tax 12 12 N

0260 Enter 25% of Excess 13 12 N

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FORM	8845	TNDTAN	EMPLOYMENT	CREDIT
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Field No.	Identification	Form Ref.	Length	Field Description	
0265	Tentative Minimum Tax	14	12	N	
0270	Greater of line 13 or line 14	15	12	N	
0280	Subtract line 15 from line 11	16	12	N	
0290	Indian employment credit allowed for current year	17	12	N	

CREDIT FOR EMPLOYER SS AND MEDICARE

TAXES

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0407" for Fixed; "nnnn" for variable format
	Start of Record Sent	inel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8846bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0020	Tips received by employees for services	1	12	N
0030	Tips not subject to the credit provisions	2	12	N
0040	Creditable tips (subtract line 2 from line 1)	3	12	N
0050	Tipped Employee(s) Wages Exceeded Maximum Amt	4	1	"X" or blank
0060	Multiply line 3 by 7.65%	4	12	N
@0065	Computation showing amount of tips	4	6	"STMbnn" or blank
0070	Form 8846 credits from flow-through entities	5	12	N
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FORM 8846		CREDIT FOR EMPLOYER SS AND MEDICARE TAXES			
Field No.	Identification	Form Ref.	Length	Field Description	
0800	Current year credit (add lines 4 and 5)	6	12	N I	
0090	Regular tax before credits	7	12	N	
0100	Alternative minimum tax	8	12	N	
0110	Regular Tax Plus Alternative Minimum Tax	9	12	N	
0120	Foreign tax credit	10a	12	N	
0130	Credit for child care and dependent care expenses	10b	12	N	
0140	Credit for elderly or disabled	10c	12	N	
0150	Education credits	10d	12	N	
0155	Credit for Qualified Retirement Savings	10e	12	N	
0160	Child tax credit	10f	12	N	
0170	Mortgage interest credit	10g	12	N	
0180	Adoption credit	10h	12	N	
0190	District of Columbia first time homebuyer credit	10i	12	N	
0200	Possessions tax credit (Form 5735)	10j	12	NO ENTRY	
0210	Credit for fuel from a nonconventional source	10k	12	N	
0220	Qualified electric vehicle credit	101	12	N	

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FORM 8846		CREDIT FOR EMPLOYER SS AND MEDICARE TAXES			
No.	Identification	Form Ref.	Length	Field Description	
0230	Add line 10a - line 101	10m	12	N	
0240	Net income tax	11	12	N	
0260	Net Regular Tax	12	12	N I	
0270	Enter 25% of Excess	13	12	N	
0275	Tentative minimum tax	14	12	N	
0280	Greater of line 13 or line 14	15	12	N	
0290	Subtract line 15 from line 11	16	12	N	
0300	Credit allowed for current year	17	12	N	

CREDIT FOR CONTRIBUTIONS TO SELECTED COMMUNITY

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0376" for Fixed; "nnnn" for variable format
	Start of Record Sentir	nel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8847bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0020	Total qualified CDC contributions	1	12	N
0030	Multiply line 1 by 5%(.05)	2	12	N II
0040	CDC credits from flow-through entities	3	12	N
0050	Current year credit	4	12	N
0060	Regular tax before credits	5	12	N
0070	Alternative minimum tax	6	12	N
0800	Regular Tax Plus Alternative Minimum Tax	7	12	N
0090	Foreign tax credit	8a	12	N

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FORM 8847	CREDIT	FOR	CONTRIBUTIONS	TO	SELECTED
	COMMUNI	YTI			

Field No.	Identification	Form Ref.	Length	Field Description
0100	Credit for child & dependent care expenses	8b	12	N
0110	Credit for elderly or disabled	8c	12	N
0120	Education credits	8d	12	N
0125	Credit for Qualified Retirement Savings	8e	12	N
0130	Child tax credit	8f	12	N
0140	Mortgage interest credit	8g	12	N
0150	Adoption credit	8h	12	N
0160	District of Columbia first time homebuyer credit	8i	12	N
0170	Possessions tax credit (Form 5735)	8j	12	NO ENTRY
0180	Credit for fuel from a nonconventional source	8k	12	N
0190	Qualified electric vehicle credit	81	12	N
0200	Add lines 8a through 81	8m	12	N
0210	Net income tax	9	12	N
0230	Net Regular Tax	10	12	N
0240	Enter 25% of Excess	11	12	N I
0245	Tentative Minimum Tax	12	12	N

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		CREDIT FOR COMMUNITY	CONTRIB	UTIONS TO SELECTED	
Field No.	Identification	Form Ref.	Length	Field Description	
0250	Greater of line 11 or line 12	13	12	N	I
0260	Subtract line 13 from line 9	14	12	N	
0270	CDC credit allowed for current year	15	12	N	
	Record Terminus Charac	ter	1	Value "#"	

Welfare-To-Work Credit

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0436" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8861bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	Blank
0005	Form Occurrence Number		7	N 0000001
0010	Identifying Number		9	NO ENTRY
0020	Qualified first- year wages	1a	12	N
0030	Total qualified first-year wages	1a	12	N
0040	Qualified second- year wages	1b	12	N
0050	Total qualified second-year wages	1b	12	N
0060	Add lines 1a and 1b	2	12	N
@0065	Group credit division schedule	2	6	"STMbnn" or blank
@0067	Line 2 difference statement	2	6	"STMbnn" or blank
0070	Welfare-to-work credit (s) flow-through entities	3	12	N
0075	Form 1041 portion amount	4	12	NO ENTRY

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FORM 8861		Welfare-To-Work Credit			
Field No.	Identification	Form Ref.	Length	Field Description	
0080	Current year welfare-to-work credit	4	12	N	
0090	Regular tax before credits	5	12	N	
0100	Alternative minimum tax	6	12	N	
0110	Regular Tax Plus Alternative Minimum Tax	7	12	N	
0120	Foreign tax credit	8a	12	N	
0130	Credit for child & dependent care expenses	8b	12	N	
0140	Credit for elderly or disabled	8c	12	N	
0150	Education credits	8d	12	N	
0155	Credit for Qualified Retirement Savings	8e	12	N	
0160	Child tax credit	8f	12	N	
0170	Mortgage interest credit	8g	12	N	
0180	Adoption credit	8h	12	N	
0190	District of Columbia first time homebuyer credit	8i	12	N	
0200	Possessions tax credit (Form 5735)	8j	12	NO ENTRY	
0210	Credit for fuel from a nonconventional source	8k	12	N	
0220	Qualified electric vehicle credit	81	12	N	

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FORM	8861	Welfare-To-Work	Credit

Field No.	Identification	Form Ref.	Length	Field Description
0230	Add lines 8a through 81	8m	12	N
0240	Net income tax	9	12	N
0260	Net Regular Tax	10	12	 N
0270	Enter 25% of Excess	11	12	N
0275	Tentative Minimum Tax	12	12	N
0280	Greater of line 11 or line 12	13	12	N
0290	Subtract line 13 from line 9	14	12	N
0300	Welfare-to-work credit allowed for current year	15	12	N

Record Terminus Character 1 Value "#"

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0759" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8862bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Year for Which You Are Filing This Form	1	4	Value "2002"
0020	Qualifying Child of Another Person Yes Box	2	1	"X" or blank
0030	Qualifying Child of Another Person No Box	2	1	"X"
0040	Beginning Date Your Home In The USA	3a	8	DT
0045	Ending Date Your Home in The USA	3a	8	DT
0050	Beginning Date Your Spouse Home In The USA	3b	8	DT
0055	Ending Date Your Spouse Home in The USA	3b	8	DT
0060	Relationship Yes Box - 1	4	1	"X" or blank

FORM 8862 PAGE 1		Information To Claim Earned Income Credit			
Field No.	Identification	Form Ref.	Length	Field Description	
0070	Relationship No Box - 1	4	1	"X" or blank	
0075	Related to the Child or Child With You-Yes Box - 1	5a	1		
0085	Related to the Child or Child With You-No Box - 1	5a	1	 "X" or blank	
0095	Child's Relationship to You - 1	5b	11	AN or blank	
0102	Name of the Placement Agency - 1	5b	35	AN, Allowable special characters are space, slash, hyphen or blank	
0111	Did You Care for The Child Yes Box - 1	5c	1	i i	
0118	Did You Care for The Child No Box - 1	5c	1	 "X" or blank	
0123	Did the Child Live with You Yes Box - 1	6a	1	 "X" or blank	
0127	Did the Child Live with You No Box - 1	6a	1	"X" or blank	
0133	Street Address During the Filing Tax Year - 1	6b Child 1	. 35	AN, Allowable special characters are space, slash, hyphen	

FORM 8	862 PAGE 1	Information	on To Cla	aim Earned Income	
Field No.	Identification	Form Ref.	Length	Field Description	
0137	City, State and Zip Code - 1	6b Child 1	25	AN	
0141	Street Address During the Filing Tax Year - 2	6b Child 1	. 35	AN, Allowable special characters are space, slash, hyphen	
0144	City, State and Zip Code - 2	6b Child 1	25	AN	
0145	Street Address During the Filing Tax Year - 3	6b Child 1	. 35	AN, Allowable special characters are space, slash, hyphen	
0147	City, State and Zip Code - 3	6b Child 1	_ 25	 AN	
0149	Name of School or Care Providers - 1	6c Child 1	35	 AN	
0152	Name of School or Care Providers - 2	6c Child 1	. 35	AN	
0154	Name of School or Care Providers - 3	6c Child 1	35	AN	
0155	Relationship Yes Box - 2	4	1	'See 1st Occ.'	
0160	Relationship No Box	4	1	'See 1st Occ.'	
0165	Related to the Child or Child With You-Yes Box - 2	5a	1	'See 1st Occ.'	
0175	Related to the Child or Child With You-No Box - 2	5a	1	'See 1st Occ.'	

FORM 8	862 PAGE 1	Information Credit	To Cla	im Earned Income
Field No.	Identification	Form Ref.	Length	Field Description
0185	Child's Relationship to You - 2	5b	11	'See 1st Occ.'
0194	Name of the Placement Agency - 2	5b	35	'See 1st Occ.'
0205	Did You Care for The Child Yes Box - 2	5c	1	 'See 1st Occ.'
0215	Did You Care for The Child No Box - 2	5c	1	 'See 1st Occ.'
0225	Did the Child Live with You Yes Box - 2	6a	1	 'See 1st Occ.'
0235	Did the Child Live with You No Box - 2	ба	1	 'See 1st Occ.'
0246	Street Address During The Filing Tax Year - 1	6b Child 2	35	 'See 1st Occ.'
0250	City, State and Zip Code - 1	6b Child 2	25	'See 1st Occ.'
0255	Street Address During the Filing Tax Year - 2	6b Child 2	35	'See 1st Occ.'
0260	City, State and Zip Code - 2	6b Child 2	25	'See 1st Occ.'
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FORM 8862 PAGE 1		<pre>Information To Claim Earned Income Credit</pre>					
Field No.	Identification	Form Ref.	Length	Field Description			
0265	Street Address During the Filing Tax Year - 3	6b Child 2	35	'See 1st Occ.'			
0270	City, State and Zip Code - 3	6b Child 2	25	'See 1st Occ.'			
0275	Name of School or Care Providers - 1	6c Child 2	35	'See 1st Occ.'			
0280	Name of School or Care Providers - 2	6c Child 2	35	'See 1st Occ.'			
0285	Name of School or Care Providers - 3	6c Child 2	35	'See 1st Occ.'			
	Record Terminus Charac	ter	1	Value "#"			

FORM 8862 PAGE 2		Information To Claim Earned Inco Credit			2
Field No.	Identification	Form Ref.	Length	Field Descripti	
	Byte Count		4	"0453" for Fixe "nnnn" for vari format	
	Start of Record Sentin	el	4	Value "****"	
0331	Record ID		6	"FRMbbb"	11
0332	Form Number		6	"8862bb"	11
0333	Page Number		5	"PG02b"	11
0334	Taxpayer Identification Number		9	N (Primary SSN)	П
0335	Filler		1	blank	11
0336	Form Occurrence Number		7	N 0000001	

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FORM 8862 PAGE 2		Information To Claim Earned Income Credit					
Field No.	Identification	Form Ref.	Length	Field Description			
0430	Was The Child Under 19 Yes Box - 1	7a	1	"X" or blank			
0440	Was The Child Under 19 No Box - 1	7a	1	"X" or blank	11		
0450	Was The Child Under 24 And A Student Yes Box - 1	7b	1	"X" or blank			
0460	Was The Child Under 24 And A Student No Box - 1	7b	1	"X" or blank	11		
0470	Name of School, State, County, Local Gov Agency-1	7c Child 1	35	AN			
0473	Name of School, State, County, Local Gov Agency-2	7c Child 1	35	AN			
0476	Name of School, State, County, Local Gov Agency-3	7c Child 1	35	AN			
0480	Was The Child Disabled Yes Box - 1	7d	1	"X" or blank	11		
0490	Was The Child Disabled No Box - 1	7d	1	"X" or blank	11		
0500	Name of Health Care Provider or Social Worker - 1	7e	35	AN			
0510	Qualifying Child of Other Yes Box - 1	8a	1	"X" or blank	11		
0520	Qualifying Child of Other No Box - 1	8a	1	"X" or blank	11		
0525	Child's Relationship To Person - 1	8b	11	AN or blank			

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FORM 8862 PAGE 2			Information To Claim Earned Income Credit			
Field No.	Identification	Form Ref.	Length	Field Description		
0530	Person's Name - 1	8c	35	AN, Allowable special characters are: space, less-than (<), hyphen (-) and ampersand (&)		
0535	Person's SSN - 1	8c	9	N		
0540	Tie-breaker Rule Yes Box - 1	8d	1	"X" or blank		
0545	Tie-breaker Rule No Box - 1	8d	1	"X" or blank		
0690	Was The Child Under 19 Yes Box - 2	7a	1	'See 1st Occ.'		
0700	Was The Child Under 19 No Box - 2	7a	1	'See 1st Occ.'		
0710	Was The Child Under 24 And A Student Yes Box - 2	7b	1	'See 1st Occ.'		

FORM	8862	PAGE	2	Information	То	Claim	Earned	Income
				Credit				

Field No.	Identification	Form Ref.	Length	Field Description
0720	Was The Child Under 24 And A Student No Box - 2	7b	1	'See 1st Occ.'
0730	Name of School, State, County, Local Gov Agency-1	7c Child 2	35	'See 1st Occ.'
0733	Name of School, State, County, Local Gov Agency-2	7c Child 2	35	'See 1st Occ.'
0736	Name of School, State, County, Local Gov Agency-3	7c Child 2	35	'See 1st Occ.'
0740	Was the Child Disabled Yes Box - 2	7d	1	'See 1st Occ.'
0750	Was the Child Disabled No Box - 2	7d	1	'See 1st Occ.'
0760	Name of Health Care Provider or Social Worker - 2	7e	35	'See 1st Occ.'
0800	Qualifying Child of Other Yes Box - 2	8a	1	'See 1st Occ.'
0810	Qualifying Child of Other No Box - 2	8a	1	'See 1st Occ.'
0860	Child's Relationship To Person - 2	8b	11	'See 1st Occ.'
0870	Person's Name - 2	8c	35	'See 1st Occ.'
0880	Person's SSN - 2	8c	9	'See 1st Occ.'
0890	Tie-breaker Rule Yes Box - 2	8d	1	'See 1st Occ.'
0900	Tie-breaker Rule No Box - 2	8d	1	'See 1st Occ.'

Record Terminus Character 1 Value "#"
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FORM 8863		Education	Credits	(Hope and Lifetime
Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0749" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8863bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Student's First Name - 1	1a	10	AN (first name) or blank
0020	Student's Last Name - 1	1a	15	AN (last name) or blank
0030	Student's Name Control - 1	1a	4	First 4 significant characters of student's last name, no leading or embedded spaces; allowable characters are alpha, hyphen or space (see special instructions) or blank
0035	Student's SSN - 1	1b	9	N or blank
0040	Qualified Expenses Paid in Current Tax Year - 1	1c	12	N
0050	Smaller of Exp Paid in Current TY or \$1000 - 1	1d	12	N
0060	Subtract Columns d from c - 1	1e	12	N

FORM 8863		Education	Credits	(Hope and Lifetime
No.	Identification	Form Ref.	Length	Field Description
0070	Enter 1/2 of the Amt in Column e - 1	1f	12	N
0800	Student's First Name - 2	1a	10	'See 1st Occ.'
0090	Student's Last Name - 2	1a	15	'See 1st Occ.'
0100	Student's Name Control - 2	1a	4	'See 1st Occ.'
0105	Student's SSN - 2	1b	9	'See 1st Occ.'
0110	Qualified Expenses Paid in Current Tax Year - 2	1c	12	N
0120	Smaller of Exp Paid in Current TY or \$1000 - 2	1d	12	N
0130	Subtract Columns d from c - 2	1e	12	N
0140	Enter 1/2 of the Amt in Column e - 2	1f	12	N
0150	Student's First Name - 3	1a	10	'See 1st Occ.'
0160	Student's Last Name - 3	1a	15	'See 1st Occ.'
0170	Student's Name Control - 3	1a	4	'See 1st Occ.'
0175	Student's SSN - 3	1b	9	'See 1st Occ.'
0180	Qualified Expenses Paid in Current Tax Year - 3	1c	12	N
0190	Smaller of Exp Paid in Current TY or \$1000 - 3	1d	12	N
0200	Subtract Columns d from c - 3	1e	12	N

FORM 8	863		Education	Credits	(Hope and Lifetime
Field No.	Identifica	ation	Form Ref.	Length	Field Description
0210		of the lumn e - 3	1f	12	N
0220	Total of	Column d	2d	12	N
0230	Total of	Column f	2f	12	N
0240	Add Amoun- 2, Column:	ts in Line s d and f	3f	12	N
0250	Student's Name - 1	First	4a	10	AN (first name) or blank
0260	Student's - 1	Last Name	4a	15	AN (last name) or blank
0270	Student's Control -		4a	4	First 4 significant characters of student's last name, no leading or embedded spaces; allowable characters are alpha, hyphen or space (see special instructions) or blank
0275	Student's	SSN - 1	4b	9	N or blank
0280	Qualified 1	Expenses -	4c	12	N
0290	Student's Name - 2	First	4a	10	'See 1st Occ.'
0300	Student's - 2	Last Name	4a	15	'See 1st Occ.'
0310	Student's Control -		4a	4	'See 1st Occ.'
0315	Student's	SSN - 2	4b	9	'See 1st Occ.'
0320	Qualified 2	Expenses -	4c	12	'See 1st Occ.'
0330	Student's Name - 3	First	4a	10	'See 1st Occ.'
0340	Student's - 3	Last Name	4a	15	'See 1st Occ.'
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FORM 8863		Education	Credits	(Hope and Lifetime
Field No.	Identification	Form Ref.	Length	Field Description
0350	Student's Name Control - 3	4a	4	'See 1st Occ.'
0355	Student's SSN - 3	4b	9	'See 1st Occ.'
0360	Qualified Expenses - 3	4c	12	'See 1st Occ.'
0370	Student's First Name - 4	4a	10	'See 1st Occ.'
0380	Student's Last Name - 4	4a	15	'See 1st Occ.'
0390	Student's Name Control - 4	4a	4	'See 1st Occ.'
0395	Student's SSN - 4	4b	9	'See 1st Occ.'
0400	Qualified Expenses - 4	4c	12	'See 1st Occ.'
0410	Student's First Name - 5	4a	10	'See 1st Occ.'
0420	Student's Last Name - 5	4a	15	'See 1st Occ.'
0430	Student's Name Control - 5	4a	4	'See 1st Occ.'
0435	Student's SSN - 5	4b	9	'See 1st Occ.'
0440	Qualified Expenses - 5	4c	12	'See 1st Occ.'
0450	Total Qualified Expenses	5c	12	N
0460	Smaller of Line 5 or \$5000	6c	12	N
0470	Multiply Line 6 by 20%	7c	12	N
0480	Tentative Education Credits - Add Lines 3 and 7	8c	12	И

FORM 8863		Education	Credits	(Hope and Lifetime
Field No.	Identification	Form Ref.	Length	Field Description
0490	Enter \$51,000 (\$102,000 if Married Filing Jointly)	9	12	N
0500	Modified AGI from 1040 or 1040A	10	12	N
0510	Subtract Lines 10 from 9	11	12	N
0515	Enter \$10,000 (\$20,000 if Married Filing Jointly)	12	12	N
0520	Divide Line 11 by \$10,000 (by \$20,000 if Married)	13	6	R
0529	Multiply Line 8 by Line 13	14	12	N
0540	Tax from 1040 or 1040A	15	12	N
0550	Total 1040/1040A other credits	16	12	N
0560	Subtract Line 16 from Line 15	17	12	N
0590	Education Credits	18	12	N
	Record Terminus Charac	ter	1	Value "#"

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		Contr .				

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0277" for Fixed; "nnnn" for variable format
	Start of Record Sentin	nel	4	Value "****"
0000	Record ID		6	"FRMbbb"
0001	Form Number		6	"8880bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	blank
0005	Form Occurrence Number		7	N 0000001
0010	Primary T/P Roth IRA for 2002	1a	12	N
0020	Secondary T/P Roth IRA for 2002	1b	12	N
0030	Primary T/P Contributions	2a	12	N
0040	Secondary T/P Contributions	2b	12	N
0050	Add Lines 1 and 2 Column (a)	3a	12	N
0060	Add Lines 1 and 2 Column (b)	3b	12	N
0070	Primary T/P Taxable Distributions	4a	12	N
0080	Secondary T/P Taxable Distributions	4b	12	N
0090	Subtract Line 4 from 3 Column (a)	5a	12	N

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FORM 8880	Credit	for	Qualified	Retirement	Savings
	Contr .				

Field No.	Identification	Form Ref.	Length	Field Description	n -
0100	Subtract Line 4 from 3 Column (b)	5b	12	N	
0110	Primary T/P Smaller of line 5 or \$2000	ба	12	N	
0120	Secondary T/P Smaller of line 5 or \$2000	6b	12	N	
0130	Total line 6a and 6b	7	12	N	
0140	Adjusted Gross Income From 1040/ 1040A	8	12	N	
0150	Decimal Amount	9	6	N	
0160	Multiply line 7 by line 9	10	12	N	
0170	Tax from 1040/1040A	11	12	N	
0180	Credits from 1040/ 1040A	12	12	N	
0190	Subtract line 12 from line 11	13	12	N	
0200	Credit for Qualified Retirement Savings	14	12	N	11

Record Terminus Character 1 Value "#"

SCHEDULE D PAGE 2		Capital Ga	ains and	Losses	
No.	Identification	Form Ref.		Field Description	
	Byte Count		4	"0331" for Fixed; "nnnn" for variable format	
	Start of Record Sentir	nel	4	Value "****"	
1840	Record ID		6	"SCHbbD"	
1841	Schedule Type		6	"1040bb"	
1842	Page Number		5	"PG02b"	
1843	Taxpayer Identification Number		9	N (Primary SSN)	
1844	Filler		1	blank	
1845	Schedule Occurrence Number		7	N 0000001	
1848	Combined Net Gain/ Loss	17	12	N	
1849	Allowable Loss	18	12	N	
1852	Unrecaptured Section 1250 Gain	19	12	N	
1856	Taxable Income	20	12	N	
1860	Smaller of LT or Combined Gain or Loss	21	12	N	
1870	Investment Capital Gain	22	12	N	
1880	Subtract Line 22 from Line 21	23	12	N	
1885	Subtract Line 23 from Line 20	24	12	N	
1895	Tax on Amount on Line 24	25	12	N	
1950	Smaller of Taxable Income	26	12	N	

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SCHEDULE D PAGE 2		Capital Gains and Losses			
Field No.	Identification	Form Ref.	Length	Field Description	
1995	Amount from Line 24	27	12	N	
2025	Subtract Line 27 from Line 26	28	12	N	
2028	Qualified 5-Year Gain From Line 8 of Worksheet	29	12	N	
2150	Smaller of Line 28 or Line 29	30	12	N	
2155	Multiply Line 30 by 0.08	31	12	N	
2170	Subtract Line 30 from Line 28	32	12	N	
2180	Multiply Line 32 by 0.10	33	12	N	
2184	Smaller of Line 20 or Line 23	34	12	N	
2186	Amount From Line 28	35	12	N	
2199	Subtract Line 35 from Line 34	36	12	N	
2203	Multiply Line 36 by 0.20	37	12	N	
2211	Add Lines 25, 31, 33 and 37	38	12	N	
2231	Tax on Taxable Income	39	12	N	
2236	Tax	40	12	N	

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Record Terminus Character 1 Value "#"

SCHEDULE K-1 PAGE 2 (FORM 8865) Partner's Share of Income, Credits, Deductions...

Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"0598" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "****"
0600	Record ID		6	"SCHbK1"
0601	Schedule Type		6	"8865bb"
0602	Page Number		5	"PG02b"
0603	Taxpayer Identification Number		9	N (Primary SSN)
0604	Filler		1	Blank
0605	Schedule Occurrence Number		7	N 0000001 - 0000005
0610	Interest Expense On Investment Debts	14a	12	N
0620	Investment Income	14a(1)	12	N
0630	Investment Expenses	14a(2)	12	N
@0635	Investment Income Attachment	14b(1)	6	"STMbnn" or blank
@0637	Investment Expenses Attachment	14b(2)	6	"STMbnn" or blank
0640	Net Earnings (Loss) From Self-Employment	15a	12	N
0650	Gross Farming Or Fishing Income	15b	12	N
0660	Gross Nonfarm Income	15c	12	N
0670	Depreciation Adjustment	16a	12	N
0680	Adjusted Gain Or Loss	16b	12	N

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SCHEDULE K-1 PAGE 2 (FORM 8865) Partner's Share of Income, Credits, Deductions...

Field No.	Identification	Form Ref.	Length	Field Description
0690	Depletion (Other Than Oil And Gas)	16c	12	N
0700	Gross Income (Oil, Gas And Geothermal Property)	16d(1)	12	N
@0705	Oil, Gas & Geothermal Attachment	16d(1)	6	"STMbnn" or blank
0710	Deductions Allocable To Oil, Gas, & Geothermal	16d(2)	12	N
@0715	Deductions Oil, Gas Attachment	16d(2)	6	"STMbnn" or blank
0720	Other Adjustments	16e	12	N
@0725	Other Adjustments (Attach Schedule)	16e	6	"STMbnn" or blank
0730	Name Of Foreign Country Or U.S. Possession	17a	35	AN
0735	Gross Income From All Sources	17b	12	N
0740	Gross Income Sourced At Partner Level	17c	12	N
@0745	Schedule of Reductions	17c	6	"STMbnn" or blank
0750	Passive Income	17d(1)	12	N
0760	Listed Categories Income	17d(2)	12	N
@0765	Listed Categories Income (Attach Schedule)	17d(2)	6	"STMbnn" or blank
0770	General Limitation Income	17d(3)	12	N

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SCHEDULE K-1 PAGE 2 (FORM 8865) Partner's Share of Income, Credits, Deductions...

Field No.	Identification	Form Ref.	Length	Field Description
0780	Interest Expense at Partner Level	17e(1)	12	N
0790	Other at Partner Level	17e(2)	12	N
0800	Passive Deductions	17f(1)	12	N
0810	Listed Categories Deductions	17f(2)	12	N
@0815	Listed Categories Deductions (Attach Schedule)	17f(2)	6	"STMbnn" or blank
0820	General Limitation Deductions	17f(3)	12	N
0830	Total Foreign Taxes Paid	17g	1	"X" or blank
0840	Total Foreign Taxes Accrued	17g	1	"X" or blank
0850	Total Foreign Taxes	17g	12	N
0860	Reduction In Taxes Available	17h	12	N
@0865	Reduction In Taxes Available (Attach Schedule)	17h	6	"STMbnn" or blank
0870	Section 59(e)(2) Expenditures: Type	18a	50	AN
0880	Section 59(e)(2) Expenditures: Amount	18b	12	N
0890	Tax Exempt Interest Income	19	12	N
0900	Other Tax Exempt Income	20	12	N
0910	Nondeductible Expenses	21	12	N

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SCHEDULE K-1 PAGE 2 (FORM 8865) Partner's Share of Income, Credits, Deductions...

Field No.	Identification	Form Ref.	Length	Field Description
0920	Distributions Of Money	22	12	N
@0925	Adjusted Basis & FMV of Securities (Attach)	22	6	"STMbnn" or blank
0930	Distributions Of Property Other Than Money	23	12	N
@0935	Adjusted Basis & FMV of Property (Attach)	23	6	"STMbnn" or blank
0940	Recapture Low Income Housing Credit: Partnerships	24a	12	N
@0945	Low-Income Housing Credit Attachment	24a	6	"STMbnn" or blank
0950	Recapture Low Income Housing Credit: Other	24b	12	N
@0960	Supplemental Information	25	6	"STMbnn" or blank
00965	Schedule K-1 Page 2 Global Statement		6	"STMbnn" or blank
	Record Terminus Charac	eter	1	Value "#"

SCHEDU:	LE P (FORM 8865)	Acquisition in Interes		ositions and Changes
Field No.	Identification	Form Ref.	Length	Field Description
	Byte Count		4	"1365" for Fixed; "nnnn" for variable format
	Start of Record Sentin	el	4	Value "***"
0000	Record ID		6	"SCHbbP"
0001	Schedule Type		6	"8865bb"
0002	Page Number		5	"PG01b"
0003	Taxpayer Identification Number		9	N (Primary SSN)
0004	Filler		1	Blank
0005	Schedule Occurrence Number		7	N 0000001 - 0000005
0010	Identifying Number		9	N or blank
0020	Name Of Foreign Partnership		35	AN
*0030	Acquisitions Name	I(a)	35	AN or "STMbnn" or blank
+0040	Acquisitions Address	I(a)	35	AN
*+0050	Acquisitions City	I(a)	22	AN or "STMbnn"
+0060	Acquisitions State	I(a)	2	AN
+0070	Acquisitions Zip Code	I(a)	12	N or nnnnnbbbbbbb or nnnnnnnnbbb
+0080	Acquisitions ID Number	I(a)	9	N
+0090	Date Of Acquisition	I(b)	8	YYYYMMDD
+0100	FMV Of Interest Acquired	I(c)	12	N
+0110	Basis In Interest Acquired	I(d)	12	N
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SCHEDU	LE P (FORM 8865)	Acquisitions in Interest	s, Disp	ositions and Changes
Field No.	Identification	Form Ref.	Length	Field Description
*+0120	% Of Interest Before Acquisition	I(e)	6	R or "STMbnn"
+0125	"See Below" Ind.	I(e)	1	"X" or blank
+0130	% Of Interest After Acquisition	I(f)	6	R
+0135	"See Below" Ind.	I(f)	1	"X" or blank
0140	Acquisitions Name - 2	I(a)	35	AN or blank
0150	Acquisitions Address - 2	I(a)	35	AN or blank
0160	Acquisitions City - 2	I(a)	22	AN or blank
0170	Acquisitions State - 2	I(a)	2	AN or blank
0180	Acquisitions Zip Code - 2	I(a)	12	N or nnnnnbbbbbbb or nnnnnnnnbbb or blank
0190	Acquisition ID Number - 2	I(a)	9	N or blank
0200	Date Of Acquisition - 2	I(b)	8	YYYYMMDD or blank
0210	FMV Of Interest Acquired - 2	I(c)	12	N or blank
0220	Basis In Interest Acquired - 2	I(d)	12	N or blank
0230	% Of Interest Before Acquisition - 2	I(e)	6	R or blank
0235	"See Below" Ind.	I(e)	1	"X" or blank
0240	% Of Interest After Acquisition - 2	I(f)	6	R or blank
0245	"See Below" Ind.	I(f)	1	"X" or blank
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SCHEDU	LE P (FORM 8865)	Acquisition in Interes	_	ositions and Changes
Field No.	Identification	Form Ref.	Length	Field Description
0250	Acquisition Name - 3		35	AN or blank
0260	Acquisitions Address - 3	I(a)	35	AN or blank
0270	Acquisitions City - 3	I(a)	22	AN or blank
0280	Acquisitions State - 3	I(a)	2	AN or blank
0290	Acquisitions Zip Code - 3	I(a)	12	N or nnnnnbbbbbbb or nnnnnnnnbbb or blank
0300	Acquisition ID Number - 3	I(a)	9	N or blank
0310	Date Of Acquisition - 3	I(b)	8	YYYYMMDD or blank
0320	FMV Of Interest Acquired - 3	I(c)	12	N or blank
0330	Basis In Interest Acquired - 3	I(d)	12	N or blank
0340	% Of Interest Before Acquisition - 3	I(e)	6	R or blank
0345	"See Below" Ind.	I(e)	1	"X" or blank
0350	% Of Interest After Acquisition - 3	I(f)	6	R or blank
0355	"See Below" Ind.	I(f)	1	"X" or blank
0357	Statement Reference - BMF Use Only	I	6	Blank
*0360	Dispositions Name	II(a)	35	AN or "STMbnn" or blank
+0370	Dispositions Address	II(a)	35	AN
+0380	Dispositions City	II(a)	22	AN or "STMbnn"
+0390	Dispositions State	II(a)	2	AN
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SCHEDU	LE P (FORM 8865)	Acquisitio in Interes	_	ositions and Changes
Field No.	Identification	Form Ref.	Length	Field Description
+0400	Dispositions Zip Code	II(a)	12	N or nnnnnbbbbbbb or nnnnnnnnbbb
+0410	Dispositions ID Number	II(a)	9	N
+0420	Date Of Disposition	II(b)	8	YYYYMMDD
+0430	FMV Of Interest Disposed	II(c)	12	N
+0440	Basis In Interest Disposed	II(d)	12	N
*+0450	% Of Interest Before Disposition	II(e)	6	R or "STMbnn"
+0455	"See Below" Ind.	I(e)	1	"X" or blank
+0460	% Of Interest After Disposition	II(f)	6	R
+0465	"See Below" Ind.	II(f)	1	"X" or blank
0470	Dispositions Name - 2	II(a)	35	AN or blank
0480	Dispositions Address - 2	II(a)	35	AN or blank
0490	Dispositions City - 2	II(a)	22	AN or blank
0500	Dispositions State - 2	II(a)	2	AN or blank
0510	Dispositions Zip Code - 2	II(a)	12	N or nnnnnbbbbbbb or nnnnnnnnbbb or blank
0520	Dispositions ID Number - 2	II(a)	9	N or blank
0530	Date Of Disposition - 2	II(b)	8	YYYYMMDD or blank
0540	FMV Or Interest Disposed - 2	II(c)	12	N or blank
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SCHEDU	LE P (FORM 8865)	Acquisitic in Interes		ositions and Changes
Field No.	Identification	Form Ref.	Length	Field Description
0550	Basis In Interest Disposed - 2	II(d)	12	N or blank
0560	% Of Interest Before Disposition - 2	II(e)	6	R or blank
0565	"See Below" Ind.	II(e)	1	"X" or blank
0570	% Of Interest After Disposition - 2	II(f)	6	R or blank
0575	"See Below" Ind.	I(e)	1	"X" or blank
0580	Dipositions Name - 3	II(a)	35	AN or blank
0590	Dispositions Address - 3	II(a)	35	AN or blank
0600	Dispositions City - 3	II(a)	22	AN or blank
0610	Dispositions State - 3	II(a)	2	AN or blank
0620	Dispositions Zip Code - 3	II(a)	12	N or nnnnnbbbbbbb or nnnnnnnnbbb or blank
0630	Dispositions ID Number -3	II(a)	9	N or blank
0640	Date Of Disposition - 3	II(b)	8	YYYYMMDD or blank
0650	FMV Of Interest Disposed - 3	II(c)	12	N or blank
0660	Basis In Interest Disposed - 3	II(d)	12	N or blank
0670	% Of Interest Before Disposition - 3	II(e)	6	R or blank
0675	"See Below" Ind.	I(e)	1	"X" or blank
0680	% Of Interest After Disposition - 3	II(f)	6	R or blank

SCHEDU	LE P (FORM 8865)	Acquisitio in Interes		ositions and Changes
Field No.	Identification	Form Ref.	Length	Field Description
0685	"See Below" Ind.	II(f)	1	"X" or blank
0687	Statement Reference - BMF Use Only	I	6	Blank
*0690	Description Of Change	III(a)	50	AN or "STMbnn" or blank
+0700	Date Of Change	III(b)	8	YYYYMMDD
+0710	FMV Of Interest Changed	III(c)	12	N
*+0720	Basis In Interest Changed	III(d)	12	N or "STMbnn"
+0730	% Of Interest Before Change	III(e)	6	R
+0735	"See Below" Ind.	III(e)	1	"X" or blank
+0740	% Of Interest After Change	III(f)	6	R
+0745	"See Below" Ind.	III(f)	1	"X" or blank
0750	Description Of Change - 2	III(a)	50	AN or blank
0760	Date Of Change	III(b)	8	YYYYMMDD or blank
0770	FMV Of Interest Changed - 2	III(c)	12	N or blank
0780	Basis In Interest Changed - 2	III(d)	12	N or blank
0790	% Of Interest Before Change - 2	III(e)	6	R or blank
0795	"See Below" Ind.	III(e)	1	"X" or blank
0800	% Of Interest After Change - 2	III(f)	6	R or blank
0805	"See Below" Ind.	III(f)	1	"X" or blank
0810	Description Of Change - 3	III(a)	50	AN or blank

SCHEDU	JLE P (FORM 8865)	Acquisition in Interes	_	ositions and Changes
Field No.	Identification	Form Ref.	Length	Field Description
0820	Date Of Change - 3	III(b)	8	YYYYMMDD or blank
0830	FMV Of Interest Changed - 3	III(c)	12	N or blank
0840	Basis In Interest Changed - 3	III(d)	12	N or blank
0850	% Of Interest Before Change - 3	III(e)	6	R or blank
0855	"See Below" Ind.	III(e)	1	"X" or blank
0860	% Of Interest After Change - 3	III(f)	6	R or blank
0865	"See Below" Ind.	III(f)	1	"X" or blank
0867	Statement Reference - BMF Use Only	I	6	Blank
@0870	Supplemental Information	IV	6	"STMbnn" or blank
	Record Terminus Charac	cter	1	Value "#"